Exhibit 300: Capital Asset Summary

Part I: Summary Information And Justification (All Capital Assets)

Section A: Overview & Summary Information

Date Investment First Submitted: 2011-09-16
Date of Last Change to Activities: 2012-07-26
Investment Auto Submission Date: 2012-02-27
Date of Last Investment Detail Update: 2012-07-26
Date of Last Exhibit 300A Update: 2012-07-26

Date of Last Revision: 2012-07-26

Agency: 009 - Department of Health and Human Services Bureau: 20 - Centers for Disease Control and

Prevention

Investment Part Code: 01

Investment Category: 00 - Agency Investments

1. Name of this Investment: CDC OID National Healthcare Safety Network (NHSN)

2. Unique Investment Identifier (UII): 009-000001380

Section B: Investment Detail

 Provide a brief summary of the investment, including a brief description of the related benefit to the mission delivery and management support areas, and the primary beneficiary(ies) of the investment. Include an explanation of any dependencies between this investment and other investments.

Healthcare-associated infections and antimicrobial resistance are major problems in US healthcare institutions. In hospitals alone, nearly 2 million patients acquire infections that contribute to more than 88,000 deaths and cost more than \$4.5 billion annually. Healthcare personnel are also at risk of acquiring infection while performing their duties. The Surveillance Branch in CDC's Division of Healthcare Quality Promotion's National Healthcare Safety Network (NHSN) today, is used for a variety of purposes including infection control, healthcare worker safety, blood safety, process-of-care measurement and improvement, prevention research, mandatory public reporting, and public health surveillance. Over 4500 healthcare facilities are enrolled with an estimated target of 5000+ facilities within the year. In addition to manual data entry, NHSN is leading an effort to utilize pre-existing electronic data from EHR and other healthcare information systems using HL7 balloted and standardized Clinical Document Architecture (CDA) documents for automated data entry. NHSN is a highly visible project in support of the CDC-wide Winnable Battles initiative. The critical priorities established for the Healthcare-Associated Infections (HAI) Winnable Battle include timely progress on national HAI surveillance and more specifically further expansion of NHSN and acceleration of electronic reporting from healthcare facilities to the CDC surveillance system. The Surveillance Branch also has lead responsibility for developing and

maintaining the technical infrastructure of operational systems used by CDC and its partners for surveillance of adverse drug events, other adverse events in healthcare, and adherence to prevention practices. To accomplish this mission with maximal efficiency and economy, the Surveillance Branch shares human and material resources to the fullest extent possible in development and maintenance work across surveillance systems, including work on NHSN and the National Electronic Injury Surveillance System – Cooperative Adverse Drug Event Surveillance (NEISS-CADES). As a result, NHSN and NEISS-CADES are managed as a single investment.

2. How does this investment close in part or in whole any identified performance gap in support of the mission delivery and management support areas? Include an assessment of the program impact if this investment isn't fully funded.

The CDC has identified eliminating Healthcare Associated Infections as a winnable battle. With additional effort and support for evidence-based, cost-effective strategies that can be implement now, the National Healthcare Safety Network has a major impact on our nation's health by tracking and monitoring the impact of prevention strategies. It is used by health care facilities and states to promote prevention and monitor progress, and have been designated for use by CMS as part of its pay-for-reporting programs.

3. Provide a list of this investment's accomplishments in the prior year (PY), including projects or useful components/project segments completed, new functionality added, or operational efficiency achieved.

Two major releases that supported the expansion of NHSN's Clinical Document Architecture capabilities; the enrollment of 1542 additional facilities for reporting; and central-line associated blood stream infection (CLABSI) reporting to the Centers for Medicare and Medicaid Services.

4. Provide a list of planned accomplishments for current year (CY) and budget year (BY).

Two major and a minor release planned to support the enhancement of system architecture to support additional user and facilities; preparation of the system to support further Centers for Medicare and Medicaid Services (CMS) reporting CAUTI and SSIs from acute care hospitals, CLABSIs, CAUTIs from long term care hospitals and inpatient rehabilitation facilities.

5. Provide the date of the Charter establishing the required Integrated Program Team (IPT) for this investment. An IPT must always include, but is not limited to: a qualified fully-dedicated IT program manager, a contract specialist, an information technology specialist, a security specialist and a business process owner before OMB will approve this program investment budget. IT Program Manager, Business Process Owner and Contract Specialist must be Government Employees.

2008-01-11

Section C: Summary of Funding (Budget Authority for Capital Assets)

1.

Table I.C.1 Summary of Funding									
	PY-1 & Prior	PY 2011	CY 2012	BY 2013					
Planning Costs:	\$1.9	\$0.0	\$0.0	\$0.0					
DME (Excluding Planning) Costs:	\$7.5	\$3.0	\$3.8	\$4.7					
DME (Including Planning) Govt. FTEs:	\$2.0	\$0.5	\$0.6	\$0.8					
Sub-Total DME (Including Govt. FTE):	\$11.4	\$3.5	\$4.4	\$5.5					
O & M Costs:	\$4.6	\$2.6	\$3.2	\$4.0					
O & M Govt. FTEs:	\$0.6	\$0.0	\$0.0	\$0.0					
Sub-Total O & M Costs (Including Govt. FTE):	\$5.2	\$2.6	\$3.2	\$4.0					
Total Cost (Including Govt. FTE):	\$16.6	\$6.1	\$7.6	\$9.5					
Total Govt. FTE costs:	\$2.6	\$0.5	\$0.6	\$0.8					
# of FTE rep by costs:	33	6	8	10					
Total change from prior year final		\$6.1	\$7.6						
President's Budget (\$)		4 3	4						
Total change from prior year final President's Budget (%)									

2. If the funding levels have changed from the FY 2012 President's Budget request for PY or CY, briefly explain those changes:

Recent funding analysis shows that the current funding would not meet the needs of the project, due to the anticipated award of Affordable Care Act (ACA) and Centers for Medicare and Medicaid Services (CMS) funding. The program is anticipating an increase in funding (base) for NHSN in FY12. In particular, FY12 costs are now revised to reflect a cost of \$9.2M compared to the original estimate of \$7.610. In FY13 projected costs are \$11.702M and FY14 projected costs are \$13.171.

Section D: Acquisition/Contract Strategy (All Capital Assets)

				Table I.D.	1 Contracts and Acq	uisition S	trategy				
Contract Type	EVM Required	Contracting Agency ID	Procurement Instrument Identifier (PIID)	Indefinite Delivery Vehicle (IDV) Reference ID	IDV Solic Agency ID	itation ID	Ultimate Contract Value (\$M)	Туре	PBSA ?	Effective Da	te Actual or Expected End Date
Awarded	7523	2002004035260 020									
				Solicitation ID	Type of Contract/Task ((Pricing)	Order	PBSA	Effective da	ate Extent	Competed	Short description of acquisition
					Cost Plus Fixed	Fee	N	2011-05-2	6	U	MULTIPLE CONTRACT TYPES
Awarded	7523	HCVLD201194 4190056									
Awarded	7523	2002011F3786 6									
				Solicitation ID	Type of Contract/Task ((Pricing)	Order	PBSA	Effective da	ate Extent	Competed	Short description of acquisition
					Firm Fixed Pr	ice	Y	2011-04-0	1	U	00HCVKDD-2011-924 68 - TASK 10 EXTENSION FOR 2010-F-33721
Awarded	7523	HHSD2002201 033893									
Awarded	7523	HHSD2002010 37219									
				Solicitation ID	Type of Contract/Task ((Pricing)	Order	PBSA	Effective da	ate Extent	Competed	Short description of acquisition
				2010N11852	Time and Mate	rials	Υ	2012-03-1	5	U	CDC INFORMATION MANAGEMENT SERVICES
Awarded	7523	HHSD2008010									

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2. If earned value is not required or will not be a contract requirement for any of the contracts or task orders above, explain why:

Exhibit 300B: Performance Measurement Report

Section A: General Information

Date of Last Change to Activities: 2012-07-26

Section B: Project Execution Data

	Table II.B.1 Projects										
Project ID	Project Name	Project Description	Project Start Date	Project Completion Date	Project Lifecycle Cost (\$M)						
286781	NHSN - HAI Surveillance	The National Healthcare Safety Network (NHSN) is a web-based information system designed for use by CDC and partners as a resource for surveillance and improvement of patient and healthcare personnel safety. The principal goals of NHSN are to improve safety by creating and disseminating knowledge necessary to detect and respond to current and emerging healthcare safety threats. The development aspects of the project primarily supports and maintain the operations of the system and integrates new feature and functionality as deemed necessary by CDC's Division of Healthcare Quality Promotion program.									
	Activity Summary										
		Roll-up of Information Provided	d in Lowest Level Child Activities								

Activity Summary

Roll-up of Information Provided in Lowest Level Child Activities

Project ID	Name	Total Cost of Project Activities (\$M)	End Point Schedule Variance (in days)	End Point Schedule Variance (%)	Cost Variance (\$M)	Cost Variance (%)	Total Planned Cost (\$M)	Count of Activities
Project ID	Name	Total Cost of Project Activities (\$M)	End Point Schedule Variance (in days)	End Point Schedule Variance (%)	Cost Variance (\$M)	Cost Variance (%)	Total Planned Cost (\$M)	Count of Activities
000704	NILIONI LIAI							

286781 NHSN - HAI Surveillance

				Key Deliverables				
Project Name	Activity Name	Description	Planned Completion Date	Projected Completion Date	Actual Completion Date	Duration (in days)	Schedule Variance (in days)	Schedule Variance (%)
286781	286781: Business Analysis (EPLC Phase)	Iteration 6.6.0.1 through 6.6.0.3	2011-10-17	2011-10-17	2011-10-14	56	3	5.36%
286781	286781: Business Analysis (EPLC Phase)	Iteration 6.6.1.0	2012-01-09	2012-01-09	2012-01-10	21	-1	-4.76%
286781	286781: Business Analysis (EPLC Phase)	Iteration 6.6.2.1 through 6.6.2.4	2012-03-09	2012-03-09	2012-03-09	57	0	0.00%
286781	286781: Business Analysis (EPLC Phase)	Iteration 7.0.0.1 through 7.0.0.7	2012-06-08	2012-06-08	2012-06-08	143	0	0.00%

Section C: Operational Data

Table II.C.1 Performance Metrics								
Metric Description	Unit of Measure	FEA Performance Measurement Category Mapping	Measurement Condition	Baseline	Target for PY	Actual for PY	Target for CY	Reporting Frequency
Data reliability and quality	%	Technology - Information and Data	Over target	85.000000	85.000000	85.000000	85.000000	Monthly
Increase in the number of new healthcare facilties	%	Mission and Business Results - Services for Citizens	Over target	95.000000	95.000000	95.000000	95.000000	Semi-Annual
Implement approved change control board changes on time	%	Technology - Efficiency	Over target	90.000000	90.00000	90.00000	90.000000	Semi-Annual
Patient safety	%	Mission and Business Results - Services for Citizens	Over target	90.00000	90.00000	90.00000	90.00000	Semi-Annual
Maintain accessbility and reliability of the application	%	Technology - Reliability and Availability	Over target	85.000000	85.000000	85.000000	85.000000	Monthly
Maintain customer (user) satisfaction rating of 90% or higher	%	Customer Results - Service Quality	Over target	90.00000	90.00000	90.00000	90.000000	Semi-Annual
Maintain customer (user) satisfaction rating of 90% or higher	%	Customer Results - Service Quality	Over target	90.00000	90.00000	90.00000	90.00000	Semi-Annual